

Medicaid Home and Community Based Waiver Programs Overview

WAIVER	TRADITIONAL SERVICES	PARTICIPANT DIRECTED (PDS) SERVICES	LEVEL OF CARE and SERVICE AUTHORIZATION
<p>Supports for Community Living (SCL)</p> <p>Services for individuals with intellectual or developmental disability with cognitive deficits who meet ICF/IID level of care and Medicaid waiver financial eligibility Medicaid Waiver Eligibility Fact Sheet</p> <p>Apply with supporting documentation through <u>kynect benefits</u> OR by calling the Department for Community Based Services (DCBS) at (855) 306-8959 or in-person at a DCBS office OR Contact the local CMHC to request completion of the application https://dbhddid.ky.gov/cmhc/default.aspx</p> <p>Websites: https://chfs.ky.gov/agencies/dms/dca/Pages/scl-waiver.aspx https://dbhddid.ky.gov/ddid/scl.aspx</p>	<p>Case management Community access Community guide Community transition Consultative clinical and therapeutic Day training Environmental accessibility adaptation Goods and services Natural supports training Person centered coaching Personal assistance Positive behavior supports Residential support services (level I, level II, and technology assisted) Respite Shared living Specialized medical equipment and supplies Supported employment Transportation Vehicle adaptation</p> <p><u>Contact:</u> http://dbhddid.ky.gov/ddid/scl.aspx 502-564-7702</p> <p><u>Forms:</u> https://chfs.ky.gov/agencies/dms/Pages/mapforms.aspx</p>	<p>Community access Community guide Environmental accessibility adaptation Goods and services Natural supports training Personal assistance Respite Shared living Supported employment Transportation Vehicle adaptation</p> <p><u>Contacts:</u> 1. Current Case Manager 2. Department for Medicaid Services https://chfs.ky.gov/agencies/dms/dca/Pages/cdo.aspx 502-564-7540 3. Department for Aging and Independent Living https://chfs.ky.gov/agencies/dail/Pages/pds.aspx 502-564-6930</p>	<p>ICF/IID level of care <u>907 KAR 1:022</u></p> <p>Initial eligibility assessment is done upon receipt of application and documentation.</p> <p>Within 60 days of allocation letter, the case manager submits level of care information, facilitates the development of the initial 120 person centered service plan, and submits the plan in MWMA.</p> <p>The Supports Intensity Scale (SIS) is conducted by a State assessor with the person and at least two respondents who have known the person for at least 90 days.</p> <p>The Case Manager facilitates person centered planning identifying what people admire about the person, what is important to and important for the person. The team identifies the amount and frequency of services to match preferences and assessed needs. The person centered service plan is developed and submitted in MWMA.</p>

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<p>Michelle P Nonresidential services limited to 40 hours per week excluding respite and case management for individuals with Intellectual or Developmental Disabilities who meet ICF/IID or nursing facility level of care and Medicaid waiver financial eligibility Medicaid Waiver Eligibility Fact Sheet</p> <p>Apply with supporting documentation through <u>kynect benefits</u></p> <p>OR Contact the local CMHC to request an assessment and completion of the application https://dbhddid.ky.gov/cmhc/default.aspx</p> <p>Website: https://chfs.ky.gov/agencies/dms/dca/Pages/mpw.aspx</p>	<p>Case management Homemaker Personal care Attendant care Respite care Environmental or minor home adaptation Occupational therapy Physical therapy Speech therapy Adult day training Supported employment Behavioral support Adult Day Health Care (ADHC) Community living supports</p> <p><u>Contact:</u> https://chfs.ky.gov/agencies/dms/dca/Pages/mpw.aspx 502-564-5560</p> <p><u>Forms:</u> https://chfs.ky.gov/agencies/dms/Pages/mapforms.aspx</p>	<p>Home & community support Goods and services Community Day support Financial management</p> <p>Contacts:</p> <ol style="list-style-type: none"> 1. Current Case Manager 2. Department for Medicaid Services https://chfs.ky.gov/agencies/dms/dca/Pages/cdo.aspx 502-564-7540 3. Department for Aging and Independent Living https://chfs.ky.gov/agencies/dail/Pages/pds.aspx 502-564-6930 	<p>ICF/IID or nursing facility level of care <u>907 KAR 1:022</u></p> <p>CMHCs complete the level of care assessment.</p> <p>Within 60 days of allocation letter, the Case Manager or Support Broker facilitates person centered planning identifying what people admire about the person, what is important to and important for the person. The team identifies the amount and frequency of services to match preferences and assessed needs. The person centered service plan is developed and submitted in MWMA.</p>

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<p>Acquired Brain Injury (ABI) For adults with an acquired brain injury who can benefit from intensive rehabilitation services designed to assist participants in re-entering the community and functioning independently. <u>ABI regulation</u></p> <p style="text-align: center;">and</p> <p>Acquired Brain Injury Long Term (ABI-LT) For adults with an acquired brain injury who have reached a plateau in their rehabilitation level. They require maintenance services to live safely in the community. <u>ABI LTC regulation</u></p> <p>Meet nursing facility level of care and Medicaid waiver financial eligibility Medicaid Waiver Eligibility Fact Sheet</p> <p>Apply with supporting documentation online using kynect or in-person at an Aging and Disability Resource Center or a Community Mental Health Center</p> <p>Website: https://chfs.ky.gov/agencies/dms/dca/Pages/abi.aspx</p>	<p>Case management Behavior programming Companion Supervised residential (level I, level II, and level III) Counseling Occupational therapy Personal care Respite Speech, hearing and language Adult Day Training Supported employment Specialized medical equipment and supplies Environmental modifications</p> <p>Contact: email DMS or call (844) 784-5614</p> <p>Forms: https://chfs.ky.gov/agencies/dms/Pages/mapforms.aspx</p>	<p>Home and community support Community day support Goods and services Financial management</p> <p>Utilizes a Support Broker through the Area Agencies on Aging (AAA) or a Community Mental Health Center (CMHC).</p> <p>Contacts:</p> <ol style="list-style-type: none"> 1. Current Case Manager 2. Department for Medicaid Services 3. https://chfs.ky.gov/agencies/dms/dca/Pages/cdo.aspx 502-564-1647 OR 855-459-6328 4. Department for Aging and Independent Living DAIL PDS page 502-564-6930 	<p>Nursing facility level of care <u>907 KAR 1:022</u></p> <p>The level of care assessment is conducted by an ABI Case Manager or Support Broker</p> <p>Within 60 days of allocation letter, the Case Manager or Support Broker facilitates person centered planning identifying what is important to and important for the person. The team identifies the amount and frequency of services to match preferences and assessed needs. The person centered service plan is developed and submitted in MWMA.</p>

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<p>HCB Nonresidential & nonmedical services for individuals who are over 65 and for both adults and children with physical disabilities who need help to live in the community.</p> <p>meet nursing facility level of care and Medicaid waiver financial eligibility Medicaid Waiver Eligibility Fact Sheet</p> <p>Apply with supporting documentation through MWMA OR Contact any HCB waiver service provider, with a physician referral, to request an assessment.</p> <p>http://chfs.ky.gov/dms/mwma.htm#what</p> <p>Website: https://chfs.ky.gov/agencies/dms/dca/Pages/hcb-waiver.aspx</p>	<p>Case management Attendant care Specialized respite care Environmental or minor home adaptation Adult Day Health Care (ADHC) Goods and services Home delivered meals</p> <p><u>Contact:</u> http://chfs.ky.gov/dms/hcb.htm 502-564-5560</p> <p><u>Forms:</u> https://chfs.ky.gov/agencies/dms/Pages/mapforms.aspx</p>	<p>Environmental or minor home adaptation Goods and services Home and community supports Non-specialized respite care PDS coordination</p> <p>Utilizes a Support Broker through the Area Agencies on Aging (AAA) or a Community Mental Health Center (CMHC).</p> <p>Contacts:</p> <ol style="list-style-type: none"> 5. Current Case Manager 6. Department for Medicaid Services 7. https://chfs.ky.gov/agencies/dms/dca/Pages/cdo.aspx 502-564-1647 OR 855-459-6328 8. Department for Aging and Independent Living DAIL PDS page 502-564-6930 	<p>Nursing facility level of care 907 KAR 1:022</p> <p>The level of care assessment is conducted by a state HCB assessor.</p> <p>Within 60 days of allocation letter, the Case Manager or Support Broker facilitates person centered planning identifying what is important to and important for the person. The team identifies the amount and frequency of services to match preferences and assessed needs. The person centered service plan is developed and submitted in MWMA.</p>

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<p>Model II Waiver In-home waiver services for an individual who is dependent on a ventilator 12 hours or greater per day, meets High Intensity nursing care services 24 hours per day and would otherwise require nursing facility level of care in a hospital-based nursing facility <u>907 KAR 1:022</u> and Medicaid waiver financial eligibility Medicaid Waiver Eligibility Fact Sheet</p> <p>Apply with supporting documentation through <u>kynect benefits</u> OR by calling the Department for Community Based Services (DCBS) at (855) 306-8959 or in-person at a DCBS office or in-person at an Aging and Disability Resource Center or a Community Mental Health Center.</p> <p>Website: https://chfs.ky.gov/agencies/dms/dca/Pages/mIIws.aspx</p>	<p>An individual enrolled in MIIW may receive up to 16 hours of private duty nurse services per day from a registered nurse, licensed practical nurse, or respiratory therapist as determined by assessment, individual ventilator dependency needs and provider staffing.</p> <p>Agencies should not routinely request 16 hours/day.</p> <p><u>Contact:</u> 502-564-5560</p> <p>Forms: https://chfs.ky.gov/agencies/dms/Pages/mapforms.aspx</p>	<p>Not applicable</p>	<p>High Intensity nursing care services 24 hours per day nursing facility level of care <u>907 KAR 1:022</u></p> <p>A registered nurse conducts the LOC assessment using the MAP-351A form and completes the person-centered service plan.</p> <p>Reevaluation for MIIW services is required every 60 days.</p> <p>Level of care determination is required every six months.</p>